01-17-01

Attorney Docket No.

PTO/SB/05 (12/97)

Approved for use through 09/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

	JC9
3	966
\equiv	-
$\stackrel{\sim}{=}$	Ŋ
=	ידי
	į

UTILITY PATENT APPLICATION **TRANSMITTAL**

Please type a plus sign (+) inside this box → +

00R2E101 First Named Inventor or Application Identifier Mark L. Wrigley PLATFORM INDEPENDENT AND NON-INVASIVE FINANCIAL REPORT MARK-UP

(Only for new nonprovisional applications under 37 CFR 1.53(b))

FL704727623 US

\geq						Express	vidii L	_auer iv	10.		1707127	020 00			
	See M		PPLICATION Apter 600 concern			tents	Α	DDF	RESS	STO:	Box	stant Comm Patent Appl hington, DC	issioner for l ication 20231	Palents Fi P	
1.	√		Transmittal Form (nit an original, and a		cessing)			6.		Microfiche	e Comput	er Program	(Appendix)	S. 054	
2.	√	(prefe	ification erred arrangement		[Total Pages	53] I	7.		eotide and/o <i>plicable, all</i>			nce Submis	<u> </u>	
			criptive title of the ss References to F		ns				a.		Compu	ter Readab	le Copy	1051 00	
		 Statement Regarding Fed sponsored R&D Reference to Microfiche Appendix 							b.	Paper Copy (identical to computer copy)					
	Background of the Invention Brief Summary of the Invention								c. Statement verifying identical of above copies						
			f Description of the ailed Description	e Drawings (if filed	1)			ACCOMPANYING APPLICATION PARTS							3
		- Clai	m(s) - INCLUDED					Assignment Papers (cover sheet & Documents(s))							
		- Absi	ract of the Disclos	ure - INCLUDED			_	0,		Assignme	iii rap o is	(COVE) Sile	et & Docum	iems(s))	
3.	√	Drawi	ng(s) (35 USC d1	13)	[Total Sheets]	9.		37 CFR §3 73(b) Statement (when there is an assignee) Power of Attorney					
4.		r Declar ing Sup	ation plemental Declara		[Total Pages	3]	10.		English Translation Document (if applicable)					
	a.	√	Executed (origin	• • •				11.		Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations					IDS
	b.		Copy from a price (for continuation)	r application (37 (⁄dıvisional wıth Bo	CFR §1.63(d)) x 17 complete	ed)		12.		Preliminary Amendment					
[Note Box 5 below]								13.	1	Return Receipt Postcard (MPEP 503) (Should be specifically itemized)					
i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR§1.63(d)(2) and 1.33(b).								14. 15.	✓	Small Entity Statement(s) (PTO/SB/09-12) Certified Copy of Priority Document(s) Statement filed in prior application Status still proper and desired					
١.,		1 Incom	aration By Dafara	on /wanahin if Da	v dh io ahaal	41	- 1	15.		ıf foreign p	•	,			
5.	,	The er	oration By Referentire disclosure of	he prior application	on, from which	a copy of		16.		Other.	A check	in the amou	ınt of \$355.0	00.	
			th or declaration is part of the disclosi												
			incorporated by r		, , , , ,			*A new	v stateme	ent is required s been filed in	to be entit	led to pay sn	nall entity fees is being relied	, except	
17.	If a CC	NTINU	ING APPLICA	ΓΙΟΝ, check ap	propriate bo	x and sup	ply t	the requisite information below and in a preliminary amendment:							
		inuatio		visional		uation-in				f US Pate		•	-		
	Prio	r applic	cation informa	ion: Anticip	ated Exami			•	•		• •				
				1	8. CORR	ESPOND	EN	CE A	DDRE	SS					
	Cusi	tomer N	umber or Bar Cod	e Label	Insert Custom	er No. or At	tach .	bar cod	de label	here) or	Co	prresponder	nce address	below	
					0207	790									
NAN	1E		Shayne X.	Short, Ph.E											
Akin, Gump, Strauss, Hauer & Feld, L.L.P								•							
	ADDRESS 816 Congress Avenue, Suite 1900														
	Austin STATE Texas								ZIP CODE 78701						
COL	COUNTRY U.S.A. TELEPHONE (512) 499-							6200 FAX (512) 499-629							
Name (Print/Type) Shayne X. Short, Ph.D.								Registration No. (Attorney/Agent) 45,105							
Signature S V SI						SV X		[DATE						
als/k						. Than'	\					01/16/0	1		J

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office. Washington, DC 20231 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

PTO/SB/17 (1/98)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL	Complete If Known					
I EL IIVARORIII I AL	Application Number	Unassigned				
Patent fees are subject to annual revision on October 1.	Filing Date	January 16, 2001				
These are the fees effective October 1, 1997 ntity payments must be supported by a small entity statement.	First Named Inventor	Mark L . Wrigley				

otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

Anticipated Examiner Name Unassigned Anticipated Group / Art Unit Unassigned Attorney Docket No. 00R2E101

TOTAL AMOUNT OF PAYMENT (\$)355.00						Attorney Docket No. 00R2E101									
METHOD OF PAYMENT					Τ	FEE CALCULATION (continued)									
The Commissioner is hereby authorized to charge to the following Deposit Account,						3.	ADDIT	IONAL	. FEES						
Deposit Ac Number		Account,		01-0660				Entity Fee (\$)	Fee Code	Entity Fee (\$)		Description	Fee Paid		
1 Akin Cump Strauga Hauar V Eald 1						105 127	130 50	205 227	65 25	Surcharge - la Surcharge - la cover sheet.	te filing fee te provisional filing fee or				
Charge any additional fee required or credit any overpayment Charge all indicated fees and any additional fee required or credit any overpayment						139	130	139	130	Non-English s	pecification				
						147	2,520	147	2,520	For filing a rec	uest for reexamination				
2.	Paym	ent En	closed	:			112	920*	112	920*	Requesting pu Examiner action	blication of SIR prior to			
Check Money Other Order						113	1,840*	113	1,840*		Requesting publication of SIR after Examiner action				
		FEE (JLATI	ON		115	110	215	55	Extension for	eply within first month			
1. BA	SIC FILI	NG FE	E				116	400	216	200		ension of time within second month			
			Entity	F D	escription	For Bold	117	950	217	475		me within third month me within fourth month			
		ee ode	Fee (\$)	ree D	escription	Fee Paid	118	1,510	218	755		me within fifth month			
i idod		204		1 (43)24	. £1! £	0055.00	128	2,060	228	1,030					
-=		201 206	355 155	•	r filing fee n filing fee	\$355.00 \$	119 120	310 310	219 220	155 155	• • • • • • • • • • • • • • • • • • • •	ice of Appeal			
1223		207	240	-	filing fee	\$	121	270	221	135	=	a brief in support of an appeal est for oral hearing			
		208	380				138	1,510	138	1,510	•	ition to institute a pubic use proceeding			
100		214	75	Reissue filing fee \$ Provisional filing fee \$				110	240	55		ve - unavoidable	* 		
114	100 2	214					144	4 220	244	660	Datition to rou	un unintentional			
108 114 			;	SUBTOT	'AL (1)	(\$)355.00	141 142	1,320 1,320	241 242	660 660	Utility issue fe	ve - unintentional	<u> </u>		
					L		143	450	243	225	Design issue f	•			
2. EX	TRA CL	AIM FE	ES				144	670	244	335	Plant issue fee		 		
					Fee fron		122	130	122	130		e Commissioner			
		-	Extra Cl	laims	below	Fee Paid	123	50	123	50		ed to provisional application			
Total Claims	20	-20**=	0	×	0	= 0	126	240	126	240	Submission of	Information Disclosure Str	nt.		
Independent Claims	3	-3** =	0	×	0	= 0	581	40	581	40		h patent assignment per number of properties)			
Mั๊มที่tiple Depe	ndent				0	= 0	146	790	246	395	CFR 1 129(a))		7		
**or number pre	eviously pa	id, if grea	ter; For F	Reissue,	see below		149	790	249	395		ional invention to be CFR 1 129(b))			
103	18 2	203	9	Claims in	excess of	20	Oth	er fee (s	pecify)						
102	78 2	202	39	Independ	ent Claims	in excess of 3							i		
104	260 2	204	130	Multiple o	lependent (claims in excess of 3									
109	78 2	209				ent claims over									
440				original p			Oth	er fee (s	pecify)				L		
110	18 2	210		original p		excess of 20 and over									
SUBTOTAL (2) (\$0.00)					*Red	uced by Ba	isic Filing	Fee Paid	<u>.</u>	SUBTOTAL (3)	(\$0.00)				
SUBMITTED BY										Complete (if app	icable)				
Typed or Printed Name Shayne X. Short, Ph.D.										Reg. Number	45,105				
							Dat	e		Deposit Account User ID	01-0660				
Signature						SXXX			01/16	5/01					

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO-Assistant Commissioner for Patents, Washington, DC 20231